					OF	COMMERCE		
	Department of Comment and Trademark O	ffico	Attorney D Number	Docket 11074/00		06		
DECLARA	ATION		First Name	ed Gar	Gary L. Koteskey			
			COMPLETE IF KNOWN					
□ Declaration OR □	Declaration		Application	Number				
Submitted With Initial Filing	Submitted after Initial Filing		Filing Date					
-			Group Art					
			Examiner	Name				
As below named Inventor, I hereby declare	e that							
My residence, post office address, and citi	zenship are as stated	I below next to my	y name.					
I believe I am the original, first, and sole in	ventor (if only one na	me is listed belov	v) or an origi	nal, first and joint inv	rentor (if p	olural names are li	sted below) of the	
subject matter which is claimed and for wh	ich a patent is sough	t on the invention	entitied.					
	BF	RISTLED SE	PHC FIL	.IEK				
		(Title of the	Invention)					
the specification of which								
was filed on (MM/DD/YYYY)		as United	d States Appl	lication Number or P	CT Intern	national Applicatio	n Number	
and was amended on (MM/DD/YYYY) (if applicable)								
	and was amen	ded on (Milwi)	' ' ' ' '			(***,)	•	
I hereby state that I have reviewed and ur specifically referred to above							ny amendment	
I acknowledge the duty to disclose inform I hereby claim foreign priority benefits ur	THE OF HEALT	States Code & 10/	(a) (d) ar 8 36	S5(b) of any foreign :	annlıcatio	n(s) for patent or t	nventor's	
I hereby claim foreign priority benefits un certificate, or § 365(a) of any PCT intern have also identified below, by checking the filing date before that of the application of	ational application wi the box, any foreign a	application for pate	t least one co	ountry other than the or's certificate, or of	United S any PCT	States of America, international appli	listed below and cation having a	
		Foreign Filing Date (MM/D/YYYY)		Priority Not Claimed	med	Copy Attached?		
Prior Foreign Application Number(s)	Country			Filolity Not Claimed		YES	NO	
Additional foreign application	numbers are listed or	n a supplemental	priority shee	t attached hereto				
I hereby claim the benefit under Title 35,	United States Code {	§ 119(e) of any U	nited States	provisional application	on(s) liste	d below		
Application Number(s)		ng Date (MM/DD/YYYY)		Additio		al provisional		
					application numbers are listed on a supplemental			
				priority sheet attached hereto.				
				nereto.				